

## **Delaware Industries for the Blind**

### **Scholarship Program**

Delaware Industries for the Blind is proud to announce the creation of a new scholarship program for college-bound high school seniors in the state of Delaware. The “**Delaware Industries for the Blind Scholarship Program**” is a \$500.00 scholarship fund which will be awarded once annually to a high school senior in the state of Delaware who is preparing for a career in education, rehabilitation, or social services.

The 2005 scholarship is open to all students who entered their senior year of high school in the autumn of 2004. Applications for the scholarship must be received in the hands of the Delaware Industries for the Blind Scholarship Committee office by April 15, 2005. Students who apply must be U.S. citizens, have an excellent academic record (“B” average or higher), have exhibited leadership traits, and have performed community service. All applications will be reviewed and the applicants judged by the DIB Scholarship Committee.

#### **WHO WE ARE:**

Delaware Industries for the Blind is a multi-faceted, non-profit company that specializes in creating employment opportunities for citizens of Delaware with visual impairments.

#### **WHAT WE DO:**

“DIB,” as we are also known, is *the* company that helps Delaware state agencies, as well as some federal agencies like NASA and the USDA, to promote their events. We also help them to recognize their employees for their services and achievements with non-monetary awards. For quite some time, we have provided quality engraving, embroidery, and screen printing to the community.

If you have any questions regarding the Delaware Industries for the Blind Scholarship Program, please feel free to contact DIB at the numbers or Email address listed below.

Sincerely,

DIB Scholarship Committee  
Delaware Industries for the Blind  
Phone: (302) 255-9855  
Fax: (302) 255-4442  
Email: [derek.alexander@state.de.us](mailto:derek.alexander@state.de.us)

**Delaware Industries for the Bind Scholarship Program**  
**Application**

**I. Personal Data (Please type all information)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Date of birth (month/day/year): \_\_\_\_\_

**II. Educational Background**

**A.** Educational Institution Attending: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cumulative Grade Average: \_\_\_\_\_

Major (if applicable): \_\_\_\_\_

**B.** List the college or university that you plan to attend in the fall:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Degree Sought Date: \_\_\_\_\_ Degree Expected: \_\_\_\_\_

**C.** List any workshops, secondary, or post-secondary schools you have attended.

Name of Institution: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cumulative Grade Average (if applicable): \_\_\_\_\_

Dates Attended: from (mo/yr): \_\_\_\_\_ to (mo/yr): \_\_\_\_\_

Certificate Received (type & date): \_\_\_\_\_

List any additional workshops, secondary, or post-secondary institutions that you attended. Please attach additional sheets if necessary.

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#### **D. Autobiographical Sketch**

In addition to information provided on this application, please provide an autobiographical sketch (not to exceed one typed page) including a statement about your vocational goals. Explain why you have chosen the field or course of study you are pursuing. Please indicate whether you wish to work with children, adults or elderly persons who are blind or visually impaired and any other details about your objectives which you feel are significant.

### **III. Work Experience**

List all of your full or part time work experience. Indicate whether this was summer employment, or during the school year. Please attach additional sheets if necessary.

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#### IV. Extra Curricular Activities

List any major outside activities (school, church, community, sports, organizational, recreation, etc.). Include the extent to which you played a leadership role. Please attach additional sheets if necessary.

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#### V. Volunteer Experiences

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#### VI. Other Scholarships

Please list other scholarships for which you have applied:

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Please list other scholarships that you have received (include date awarded):

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## **VII. Essay**

Please write an essay (not to exceed one typed page) on the following subject:

**“What would my life be like if I didn’t have sight?”**

Mail completed application to:

**Delaware Industries for the Blind**

Attn: DIB Scholarship Committee

1901 N. Dupont Hwy.

Biggs Bldg.

New Castle, DE 19720